

SERIAL NUMBER <div style="text-align: center;">09/135,789</div>	FILING DATE <div style="text-align: center;">08/18/98</div>	CLASS <div style="text-align: center;">128</div>	GROUP ART UNIT <div style="text-align: center;">3733</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">98-Q40</div>
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APPLICANT

SHAHRAM S. OMRANI, PASSAIC, NJ.

  
  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
 VERIFIED

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**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
 VERIFIED

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**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
 VERIFIED

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FOREIGN FILING LICENSE GRANTED 09/09/98
\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ <div style="display: flex; justify-content: space-between; font-size: small;"> <span>Examiner's Initials</span> <span>Initials</span> </div>	STATE OR COUNTRY <div style="text-align: center;">NJ</div>	SHEETS DRAWING <div style="text-align: center;">1</div>	TOTAL CLAIMS <div style="text-align: center;">9</div>	INDEPENDENT CLAIMS <div style="text-align: center;">3</div>
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ADDRESS

TERRANCE L SIEMENS  
 P O BOX 2607  
 FAIRFAX VA 22031

TITLE

CONDOM SIMULATING VIRGINITY

FILING FEE RECEIVED  <div style="text-align: center;">\$395</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="font-size: small;"> <input type="checkbox"/> All Fees  <input type="checkbox"/> 1.16 Fees (Filing)  <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)  <input type="checkbox"/> 1.18 Fees (issue)  <input type="checkbox"/> Other _____  <input type="checkbox"/> Credit         </div>
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